Empathy and Expertise: Dr. Lipi Roy Discusses the Future of Healthcare Amidst Political Challenges Transcript

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So whether you're studying for your medical school finals, surgical or any other professional exam, pastis can help you. Now back to the show. We. Welcome back to Safe Space.

Today we have the distinct pleasure of introducing a truly remarkable guest who is making significant strides in the field. Doctor lippy Roy. Doctor Roy is a renowned physician, a public health advocate, and a thought leader.

Known for her commitment to improving patient care and health equity with a wealth of experience in both clinical practice and health care policy. Doctor Roy has dedicated her career to addressing some of the most pressing challenges in modern healthcare.

Her work spans various areas, including disease prevention, health, education, and community initiatives. As a passionate advocate for underserved populations, she has always been at the forefront of efforts to ensure that everyone has access to quality care.

It's my absolute privilege to have you on the show today. Doctor Roy, welcome. Good greetings from New York City. It's so I'm just thrilled to be here.

Thank you for creating this wonderful space to have these wonderful conversations. Thank you Miriam. My pleasure. What inspired you to, pursue a career in medicine?

How did your journey lead you to focus on your area of specialty addiction and mental health?

Journey Into Medicine and Addiction Care

Yeah, well, so my journey into medicine to take it a step way back. I come from a family of a lot of, doctors, surgeons. But, you know, my my mom and dad never pressured me to go into medicine.

I think I was very interested in math from a very early age because they got me to doing math. As a lot of Indian families parents do. So. But then I got interested into biology when I was in high school.

Microbiology. My high school was one of the only ones that camera that taught, microbiology at the high school level. And I was pretty fascinated by science and health and, and then, yeah, I pursued molecular biology and biotechnology when I was in undergraduate studies.

And, I did research in a lab. So the process of science and medicine and physiology and medical research, I just found all of that really fascinating.

And, after I finished, I did graduate school in neurophysiology. I presented and then I got hired by a big pharma, called AstraZeneca. And one of the years I presented my data at this large conference called society for neuroscience, and it happened to be in New Orleans, which is a really fun, fascinating city.

And I did some homework. And by this point, I was kind of itching to go back to school. And so I did some research, at Tulane University, had a four year MD, MPH dual degree program.

I applied, I got in and kind of the rest is history completely changed the trajectory of my life and career. But, you know, I was just always just fascinated by diseases, illnesses, the human body, how it responds.

I was also a big, big I always played sports and I was a big hockey fan growing up. Again, all these stereotypes Canadian hockey fan. But but you know, and lights and sports related kind of injuries and how people healed, how the human body healed.

So that was the journey into medicine. Your question about how I got into addiction medicine, mental health, that really happened by accident. So I served as a after I finished my residency at Duke in Internal Medicine, I started working as a primary care doctor to Boston's homeless population and about a year, a year and a half into the job, one of my colleagues, was looking at mortality data among my patients, Boston's homeless population, and discovered that the leading cause of death was drug overdose.

Now, this was back in 2013, before we saw all these daily headlines of heroin and fentanyl. As we see now. So that in a very short time frame, like within five years, drug overdose bypassed, surpassed rather of the previous causes of death among the city's most vulnerable population, which had been heart disease, HIV, Aids and cancer.

So in a very short time period, drug overdose, overtook and was the leading cause of death. And so, that's what I, me and all my colleagues started to really try to understand what was happening, why this was happening, and how to really intervene in a way that's effective, evidence based and compassion based.

And so I really me and my colleagues started doing a lot of listening, listening to substance use counselors less, listening to psychologists. But first and foremost, listening to our patients, the people that were using and misusing and frankly, dying of of different substances.

And, I then got board certified in addiction medicine. And honestly, that's what really changed the trajectory of my life, both personally and professionally, because I think learning about the brain biology of addiction, learning about harm reduction and reducing harm, learning about stigma, all of these things really, to this day have had a profound way, impact on how I frankly not only treat people as a doctor, but how I treat other fellow human beings.

Yeah, absolutely. I mean, you you sound like a person really driven by thirst for knowledge. And you just, you know, go out and get it. But there's also such, compassion and empathy to, to how you, you do your treatment and how you provide your services.

And I think that can sometimes get lost in translation as we're trying to provide a service, that, that empathy, can be lost and replaced by stigma, especially somewhere, like mental health and addiction.

So that moves us on really nicely to, my next question, can you tell us a little bit about Seton Med and, your vision behind founding this health speaking and training company?

Yes. Well, thank you for asking me about my my company CGM, which I just launched last July, July 2023, actually, specifically on my birthday, July 17th.

So, in my social media posts, I said today is not only my birthday, but it's also the birth of my first ever company. And that that post got so many, so much reaction and such positive, feedback.

I was so touched. But so let me go back a little bit and describe the motivation for creating cetrimide, which by the way, stands for strength and inspiration in trauma and addiction using mindfulness, empathy and delight.

So, in the three years leading up to, to the launch of my company, as you know, the globe was dealing with this pandemic, called, caused by the virus SARS-CoV-2.

And everyone in the world, I think was impacted, certainly myself living in here, living here in New York City, and I, was the, completely burned out during the pandemic, as I know many people did.

In my case, I had three clinical jobs for serving as, the medical director of Covid isolation and quarantine sites. So, in other words, these are hotels that had become vacant in New York City because New York City was the global epicenter of of the pandemic.

These hotels were kind of, overtaken by, city run city agencies like DHS, Department, homeless Services market, the Mayor's Office of Criminal Justice.

And so these hotels were soon, housing Covid infected homeless individuals. And so these individuals needed medical services, in these hotels during this unprecedented pandemic.

And so city agencies partnered with other health agencies, contracted with these different organizations. One of them was called Housing Works, which is a wonderful health nonprofit that has dedicated its mission to the dual diagnosis or dual epidemic, pardon me, of homelessness and HIV Aids.

And and they to this day provide wonderful primary care and mental health and other services and harm reduction services. Anyway, so Housing Works was one of the, contractors, organizations that oversaw medical services.

They brought me on board to oversee medical services. I was working side by side with another newly hired director of clinical operations, this wonderful woman named Marianne Marino.

And we work side by side. She did all of the operations side in terms of equipment and hiring, recruiting. I also did a lot of the work with her to interview nurses and medical assistance and, other staff.

And, and we were I was writing clinical protocols, weekly meetings with the CMO, who was my boss, Chief Medical officer, and then other leadership. It was, you know, if if you're ever familiar with that expression, building the plane while you're flying it, there was no blueprint for anything intensive.

Yeah. So there was no blueprint for what we were doing. And so meanwhile, in the city, I mean, just people were done. 100 thousands people were infected by Covid, severely ill from Covid, hospitalized with Covid, dying from Covid.

And because this is well before forget a vaccine. This is well before we had actual good treatment. And New York City has such a shortage of PPE mask, gloves.

We weren't using any of that in the hospital.

Founding Seton Med and Burnout Recovery

So anyway, so I was doing that. That was one job that I had. I was also, once a week working at a harm reduction, clinic in the Bronx, which is the poorest congressional district in all of United States, not just New York.

So I was treating patients with opioid use disorder, opioid addiction in the Bronx once a week. And then once the Covid vaccines came out, that was late 2020, early 2021.

I started working at, vaccinations. It's just volunteering in the beginning. And then once a week on the weekends working at these vaccination sites, overseeing, you know, vaccination.

So those were the three clinical jobs I had. In addition, I was doing a media work, as an MSNBC and NBC news medical contributor. As you remember of Miriam, every day we were learning something new about this virus, SARS-CoV-2.

And so these news organizations at MSNBC, they really needed the public needed to understand what was going on. And so at almost, between 2020, 2021, I did over 350 on air appearances, talking about all things Covid related, health related.

And then I was also writing I'm a Forbes contributor, so I was writing regular articles, on Forbes and and then, so in addition to the like, clinical and media appearances, I was also doing, virtual speaking and consulting.

So after that, a year and a half of that unsustainable pace, I completely burned out. I had to make some changes. I actually launched a YouTube health show, so I started working part time.

I went to my boss and I said, I'm. I'm really struggling. She said, you know what, Libby? I actually have another part time opportunity. I need a medical director for the major sites, Mayor's Office of Criminal Justice that was overseeing 4 to 6 hotels.

But it was at least part time. I was still doing some of the media work, but not as many. And, you know, I just realized, after three years of working at Housing Works, my, that contract ended last June of 2023.

And then in July, I launched to med because I just recognized Miriam, that while I was working around the clock, I was clearly burning out. I was really just unhappy.

I was, having difficulty sleeping. I was anxious, I was frustrated, I was abrupt with people in my life who I loved, I cared about, I just knew this is not who I am.

And and then around me, people were also struggling. People I knew, people I didn't know I was reading the news. People were really struggling. They were at this point now 20, 23, people were going back to work even early before that.

And organizations, leaders, managers, they were trying to figure out, hey, how are we going to get people to come back to work after they were either unemployed, working remotely?

They're trying to figure out how to take care of their families, their own health. What, you know, are we still doing distancing? You know, that social physical distancing, do we have to be vaccinated?

Do we have to be? So people had all these questions and they were really people were depressed, people were anxious, people were frustrated. And so here I am.

I was in a position of privilege. Even though I was burning out, I still had an ability to make decisions, I had opportunities, I had medical knowledge, mental health knowledge.

And so I launched this company because I wanted to do a lot more. I was already doing speaking well before the pandemic. There was a halt, during the pandemic where live in-person speaking and conferences were happening.

But people still had questions and they wanted to get help. And so I launched this company, to because at this point, people were now having a meeting in person, and it was just my way of kind of giving back, sharing my knowledge, unique knowledge in medicine, in public health, in, in, in, in, in addiction and mental illness and share that with as many people as possible.

So right now it's a health speaking company. I'm also in the very early stages of developing an AI driven, addiction app. So, that's what I'm doing. I'm reaching out to different organizations, conferences, to leaders, the finance, finance, industry, media, entertainment, tech.

There's a lot of industries where stress levels are really high, high pressure industries, air as well, human resources, and trying to really help them in terms of self-care, what does, you know, high risk alcohol, consumption look like, what does, chronic sleep deprivation look like?

And how do simple steps to get that better eating disorders. You know, all these things have really, you know, especially sleep, sleep disorders, substance use, alcohol consumption, particularly among women, social media addiction.

So this in addition to substance use disorders, there's also behavioral addictions, social media, gambling, gaming, all of these have really increased. So.

And why is that? I addressed those, those issues using my company. Well, I wonder if I could, I could join on to the app because it does sound incredibly helpful.

I think this the way that you're tackling, this kind of rise in disinformation is so admirable. And I also recognize that you are only one person as well.

And I can totally hear you when you say that at the end of those three long years that you were burnt out because you have so much to give, and yet you are one person who also needs that rest and recuperation.

So taking a step back and and being part time, with your job certainly sounded like a wise decision. But then setting up this company has also been such a, such a fantastic starts to hopefully providing people, facts in this just breaking up this kind of, sea of disinformation.

I guess that leads on to my question regarding legacy media, which does seem, from what I can tell, afraid to delineate between fact and fiction in order to somehow avoid being partizan, especially in this incredibly volatile political climate.

As you said, you are the medical contributor and commentator for for multiple, national media outlets in the US. So MSNBC, CNN News Nation, how do you, approach communicating this complex health information to the public?

And, what role would you say you think media plays in shaping public health awareness? Yeah, those are really stellar questions and highly relevant right now.

Miriam. Another major reason I launched to med and I do the media work that I do is really to combat disinformation. There is a particular when it comes to medical, misinformation.

There's so much of it. And it's not that. I mean, when I think about my own patients, and my own family members, it's, I mean, they want to lead healthy lives.

Everyone wants to be healthy and happy. Sometimes they just don't know how. And it's not that they deliberately trust bad information. They just have difficulty distinguishing what's accurate and what's not.

And that's why I think it's our responsibility as physicians, as trained health, medical, public health professionals to understand ourselves what is accurate or what is the best available science and and distill that down and explain it to the public, to our patients, to our family members, our loved ones, our colleagues, in the best way possible and the most accurate as well as engaging way possible.

So a lot of what I do, is so when I prepare other presentations, when I write articles, when I appear on media, I do my best to understand the the most available, best available science and literature to describe whatever the health topic may be.

So, for instance, there's been a rise in whooping cough or pertussis, and it's certainly in the United States. So why is that? You know, so me going to I don't just look at one news source.

I go back to the original medical journal or scientific journal where it was published. Ideally there were multiple articles. Then I just try to get the landscape of it.

So I do a lot of reading, a lot of preparation, certainly before up 3 or 4 minute on air appearance. Before I write an article, I try to understand. I try to interview and read articles, interview the scientists, the researchers, the doctors, the public health officials, you know, the people who are affected, you know, and so I try to get as much information as possible, and then I use my own medical training and, you know, to get that clinical gestalt, you know, to understand really what's happening.

So, so, you know, that's the privilege I have as a physician who's been under has undergone years of training and then, you know, and then I went to grad school understanding the biomedical research.

So I really try to work very hard in understanding things myself. And again, I'm privileged because I have many, many friends and colleagues that are that are biomedical researchers, that are scientists, that are medical specialists, rheumatologists, infectious disease surgeons.

So I can lean on all of these different friends and colleagues. So I always try to get as much information as possible to, to understand and then provide the most accurate information as possible in my way of combating misinformation.

And then I also have a YouTube show called, you know, Health, Human Harmony, where I'm trying to also, explain concepts that I think are relevant, to the public.

I think when I've been reflecting on why there was such a rise and in disinformation and how appealing it is, I really get the sense that maybe in the last few decades or maybe longer than that, we as a, an expert community, not just in medicine, but, in any, in any system or any profession, maybe there is a hubris to the knowledge that we, that we spend years acquiring.

And I think that maybe it has been more difficult than we've realized to be able to communicate this expert knowledge to, the public, to the general public.

Yeah.

Combating Medical Misinformation in Media

And I think that that's led to, miscommunication or resentment, and levels of prejudice and stigma between both communities. So, it now seems that, opinion and emotion, as valid as fact.

And I think that's the challenge that we as experts have to, have to overcome and that you're doing incredibly and you're so inspiring to me, in how you communicate so effectively.

And it's something that I'm learning to, to be able to communicate expert information in an understandable and compassionate manner. So that we're all on the same level playing field, and we come across as people who are providers of a service rather, and, rather than experts sitting on some snowy top of a mountain completely unrelated to your average Joe.

And I think and I think also part of the reason why I'm doing this podcast is humanizing the healthcare professional. I really want to take back, that leverage of, emotion, that people who kind of peddle disinformation, do so well, you know, and I really want to humanize the fact that we're we have emotions and we have feelings as we're trying to give out this information, as we're trying to do our jobs.

We are also people. And I think by doing that, then we can get a common understanding and find hopefully that some common ground and, and a way through and a way through all this division and the, the divisiveness.

Yeah. Yeah. Well, you mentioned this each word, which is hubris. And I will say, and for better or for worse, let me just say that the Covid pandemic, I, I've said this in multiple presentations.

There's nothing like a pandemic to exploit the existing cracks, certainly in the US healthcare system. I frankly, I think even in the UK healthcare system.

So I'll speak, the US when I know that better. But it's not just cracks in the U. S health care system, criminal justice, housing, education a lot. So I think it was some universe's way of saying, okay, we need to just take a break, stop what we're doing, because there's a lot of things that aren't working regarding that, the hubris, I think what the one of the things that the pandemic exposed was that, like many things, but, public health departments were grossly

underfunded, listed here in the United States for, for years, if not decades.

And that led to a lot of, gaps. There was a lot of, just lack of knowledge, education, about health, about public health. A particularly this idea that science, that it's science evolves.

And I don't think the public really understood that, you know, people like, say, Doctor Anthony Fauci, had by certain people who, who have, I think, political agendas, on the right, accused him of lying.

He was lying about masks. And he did lie. He just didn't have all the data because the data was evolving every single day, almost. And so, so there's kind of that lack of information from the public and, and then certain people who had agendas exploited that.

And so but that said, in the scientific and medical community, we need to also just understand that when we are, incorrect or when we don't have the right information, we need to be very clear about that and not use fancy big scientific language, but really distill it in a way that the public will understand.

That doesn't mean dumbing it down. It's a real art and skill to be able to explain something in a way that's digestible. Look, I'm no, I'm no astrophysicist.

And so if somebody is some astrophysicist is using really high tech language, I'm not going it's going to go over my head. And so it's his or her responsibility to explain it in a way that I'll understand.

So so I think the medical scientific community also needs to understand when we are, saying things that, that maybe aren't correct and, and scale that back and acknowledge if an error was made, if and when errors are made.

But I think the public, hopefully will be understanding when that happens. And we just it's the Covid was so politicized in a bad, bad way in an exploitative way, and frankly, in a truly harmful way, because and even to this day, Miriam, when medical information is misused, at the very extreme, people will die.

It's just really as simple as that. And I don't think I'm not being dramatic. And we can use vaccines as an example. If, you know, the anti-vaccine movement was on the rise well before the pandemic, but it's skyrocketed.

Selena in the United States. Yeah, exactly. And so and now, it's look, I, I'm a primary care doctor, I believe in prevention. And and and preventive, interventions such as vaccines prevention also includes colonoscopies and mammograms, but, they work and, unfortunately, there's a certain group that that's exploiting the vulnerability of, say, new moms who really want to protect their babies and now are being told by certain, people with an agenda, political agenda, that vaccines are all dangerous.

And so I just think that's not I don't think I know that's really harmful. So it's, there's a hubris here, right? Among health professionals. We need to reach people where they're at and understand why people have questions and address it and not say, hey, you're not getting a vaccine.

You're stupid. What's wrong with you? That doesn't work. That kind of judgment doesn't work. So understanding. Well, what have you heard? What information have you heard?

Let's talk about that, because here's what I know. This is what I've been trained in. And this is what the data decades of data show. So I think we need to meet people where they're at.

That's a very common motto and philosophy. And in the harm reduction world, which I think should apply easily to other, facets of life. Yeah. I mean, I think coming, coming at it from us, from a perspective of all the research and the evidence that shows that vaccines are effective and then meeting someone where they're at and who is, skeptic of, vaccination, I can also completely understand why someone would be, skeptic of vaccine, of vaccination, especially from, the from the black community or people of color who have had, generations of, of abuse really from the medical system and you know, at the, at the expense of them.

There has been, there has been acceleration and progress in medicine, but it has come at the cost of a race of people. So I can come at it with empathy and say, there is a reason why people are distrustful, distrustful, and we need to, come at it, by leveling up in our communication, leveling up, you know, empathy and compassion and working with people because ultimately, I think it is about recognizing that both our agendas do actually align.

The public do want good health. You know, people want to look after themselves. And we we have, data, we have research. And the end outcome of this is to provide better outcomes for our patients.

So this is the barrier that we need as a medical community to keep breaking down, because there's always going to be someone, somewhere with an agenda.

But we need to keep trying to do well. Our duty of care is, now there's going to be sweeping changes in Trump's America. This is a very timely podcast, episode.

And, I'm hearing that there is the, the removal of the Affordable Care Act, ahead, potentially nationwide limits on abortion, vaccine skepticism from right within the administration.

And I wanted to have a conversation with you about how the medical community is preparing for these changes. Yes. This is definitely, a timely, question.

It's one of, deep concern for a lot of, my colleagues in the health profession. There's a lot of. So the short answer is there's a lot of uncertainty.

Healthcare Policy, Public Health, and Advocacy

And, I don't know, it, I, I don't know, I am certainly hopeful. For my sake, for my patients sake, for the sake of the country's most vulnerable. Let's let's first start with some positives.

I think there could be some, some hope, with some of these recent nominees, health, for medical cabinet positions such as the HHS department, Health and Human Services, CDC, CMS, Medicaid, Medicare services, there's a quite a theme of, a thread, a common thread amongst these individuals about addressing nutrition, addressing, addressing chronic diseases.

Again, as an internal medicine physician from a primary care. I am all for that. I am all for, making sure as a country people eat healthier. Our food industry has a lot of, the toxic foods, per processed foods.

But as long as they come at it in the right way in a way that's non-judgmental, in a way that's, compassionate based, a way that addresses, the needs of marginalized communities, you know, making sure that, there's no no more food deserts.

We have good, affordable, fresh fruits and vegetables, lean, you know, proteins, whole grains, all of that. We're introducing exercise. And so as I am all for that, because I'm well aware that the leading causes of death in this country, in the United States remain, you know, heart disease, cancer, stroke, diabetes, almost all of which are almost completely preventable by adopting a healthier diet.

I'm all for that, if that's done in the appropriate way. Now, that said, there are there's tremendous concern, and we're already seeing this in multiple states, in the United States.

And that is such a clear roll back, in women's health and access to women's health, not just reproductive health in a lot of these areas. Let's say take Texas, for example, where obstetrician gynecologist are are leaving the state as you know, Miriam, ob gyn doctors don't just provide reproductive health, i.e.

helping women with their pregnancies, and, and miscarriages and, and abortions, but they also do a lot of preventive health screening. They help with endometriosis.

They help with breast cancer, you know, mammograms and all these other cervical cancer. So much of women's health. But when if you have a are a state, one of the largest states in United States where ob gyn doctors are leaving because their they feel their hands are tied because of lawmakers, these are people with no medical training that are making decisions that are handcuffing highly trained specialists.

To me, that is extremely alarming. And I'm somebody of privilege. Can you imagine the women and their families that live in states like Texas, who don't have the money and the resources to just, oh, I'm going to get this other care somewhere else.

I'm just going to pick up and move. That's just not feasible. And that's just one example in one state. What we are seeing in multiple says, well over 20 states in the United States is so severe restrictions in women's reproductive, access to women's reproductive health.

And, you know, when you have a Supreme Court that has, turned back Roe versus Wade, which would, which is afforded 50 years, 50 plus years of, of, abortion care to women, it's extremely alarming.

And we're seeing examples of that happening here in the United States. Maternal mortality, by the way, in the United States was already the highest among industrialized nations.

And now we're just I'm afraid that's just going to continue to rise. We're already seeing women in multiple states where we have rates. Our reproductive rights have been, roll back significantly where women are dying just trying to get, care.

It's so among me and several of my, fellow health care professionals, we're very, deeply, deeply concerned and frankly alarmed. So, I can imagine that getting better with, President Trump coming in and, other of his people that he's I mean, that's what he's promoted.

And, I'm very concerned about, society's most vulnerable. That includes women. Well, these are challenging times ahead. Let me add them. Can I just add on that?

I don't want anyone to feel, though, after listening to that that that. Oh, they're they're helpless. There's nothing they can do. This is just we. I have to accept it.

I don't believe that at all. And in fact, I believe that we all need to then double down on on advocacy, on activism. And just that, the way these people got voted in, they can also get voted out.

Right. So, and we need to lead with science and storytelling and compassion and advocacy. I believe that that's that's how the world works. And, yeah.

So there's a lot of a lot of organizations led by truly innovative, innovative, compassionate, smart people that are really leading the change, leading the charge to make sure that, positive change is on its way.

That gives me a lot of light. And I think that is much needed. During this time, I always, look to history for comfort, during these times, because I think the moral here is that it was never a battle that we won one time, and that you keep up the fight to keep up the fight for information.

And it is constant. And I think before anyone of our listeners, including myself, feels this despair, the kind of state of the world. I think it's important to recognize that the news always, has a focus on what's bad and what's hot and what's now.

But there is good work being done by by experts, by people who are passionate, who care about people and the planet, and they are going about the work without making any noise.

And the work continues. And it is important to recognize, you know, the good work that you're doing, the good work that people are around the world are doing for the rights of, of vulnerable people, whether that's women with us,

people of color with that, whether that's veterans, you know, everyone, everyone needs an advocate.

And I think that especially at these times, we need to hold on to, to the people that are still doing the work and chipping away and not lose hope after all.

So I feel like that was a really wholesome discussion. And, it was, just much needed for me because as someone who has a lot of anxieties, about, about the US, about, the way that the world is going, it's really important to have these conversations with someone who's very much in the mix and to, who stays current and who's actively tackling disinformation.

So, so it's been honestly a light, like a weight lifted off my heart speaking with you. Well, Miriam, I can I just add that, I mean, when I first met you in London, I've just earlier this year, this summer, I was so impressed by your, compassion, your intelligence, your perspective, and the work that you're doing as a clinician, a physician and a storyteller.

You're bringing together. I, I'm just so honored to be here, but you're bringing together so many wonderful people and creating a safe space. Brilliant name for a podcast, to have these conversations.

So you're doing great, great work. And I'm very proud to know you. Oh, thank you so much. Oh, that's, that's kind of overwhelming.

Self-Care and Closing Remarks

I meant every word. I really appreciate that. Yeah, yeah, I think, as well, you feel like you're chipping away the the one person that you are and you don't know if you are making a difference.

So I think this kind of validation is always so much appreciated. Change happens one person at a time. So whenever I have people, a lot of doctors, for instance, like I'm trying to encourage a lot more, a part of my talks that I give, I talk about, medicine, media advocacy because I'll be honest, Miriam, I was late to the advocacy game.

But it's never too late. Never too late to start. And one of the pushbacks I get, oh, I don't have time. And I'm like, I get as doctors, we, you know, Miriam, we're very busy.

We get burned out, we get very stressed. We have a high pressure kind of in the industry and work that we do. But you know what I tell people, you know, sending, a signing, an online petition takes seconds.

I know, because I've done it, sending an email to an elected official, a mayor, a member of parliament. That email can take two minutes. Making a phone call, takes maybe five minutes.

Everybody has 30s two minutes. Five minutes. Donating money. So there's so many ways, especially when a doctor does advocacy. When a doctor uses his or her voice, it really lands differently.

So, and the fact that you're doing this kind of work, Miriam and all the other work that you're doing, it really just makes a difference. One person, one day at a time, it'll make a difference.

Thank you. So let's draw this to a conclusion and say it's been a miserable day. People have been difficult. Okay? It's been raining and you haven't seen the sun.

What do you do when you get home to unwind? What a wonderful question. I this is so, like, part of my bread and butter. I love talking about basically self-care, how it's so important to take care of oneself.

Some of the things that I do that bring me joy and and restore my sense of wellness, I, I when I get home, I just honestly get into my pajamas, my nightgown.

I just change out of my work clothes and into a comfortable, more comfortable clothes. I, I turn on music, I cook

something, I maybe have a snack, I cook dinner.

I, there are other times by the way, that I'll. And then I'll, I'll make dinner, I'll watch TV, I'll watch things that make me laugh, that bring me joy.

I'll play my piano. Other times I will, change into something fun. And, I'll go out with, family, friends. I'll just do something fun again. I'm in New York City, so there's always this no shortage of fun things to do.

I do different things that, relax me. I surround myself with people that make me laugh, that care about me. I do activities that, that just relax and calm my nerves.

And by the way, sometimes that includes just plopping my butt on my sofa and lying there and doing nothing. That's completely fine. And frankly, it's needed.

And I also make sure I get 7 to 8 hours of sleep every night. There are certain exceptions here and there, but for the most part, I, I just, I set boundaries, and I just, I say no to people, to things, because I know I over network, I over stretch, and I know many people do that, but those are just a few of the things that I do to bring a sense of, of peace and wellness to my life.

Thank you so much, doctor. Boy, that is a real wealth of information on self-care right there. And, in a two minute nugget, but, yeah. Thank you for adding a little bit more light, to this time, in my life, really, it's it's been such a pleasure speaking with you.

I hope you've enjoyed as much as I have. And I hope our listeners have enjoyed, too. It's been a total joy. Mary, Keep up, keep doing your great work.

It's a it's been a real honor, and I hope you enjoy the rest of your day and what's left of 2024.